

NOTES FROM THE MEDICAL PRESS

IN CHARGE OF

ELIZABETH ROBINSON SCOVIL



TASTE IN RELATION TO BODILY NEEDS.—The *New York and Philadelphia Medical Journal* gives an interesting synopsis of an article in the *Roussky Vrach* on an important point in feeding: "Borrisoff says that every animal, including man, eats that food which it needs for the carrying on of its functions, and that instinct causes it to like that food best, because it produces a more pleasant sensation upon the nerves of taste; for example, the well-known propensity of herbivora to eat salt, to which carnivora are indifferent. In eating plants herbivora ingest freely potassium salts, which cause an increased elimination of sodium chloride. Every ranchman knows that the addition of common salt to the fodder of cattle produces an improvement in the well-being of the animals. In man, also, nations that feed largely on animal food use much less salt than vegetarian tribes. The change in the taste for certain foods in women during pregnancy, and in girls during the development of puberty, are examples of alterations in tastes according to the needs of the body. In children there often occur desires for various indigestible substances, such as chalk, charcoal, etc. In these cases the growing body craves certain salts, *e. g.*, calcium, certain alkalies, such as those in unwashed coal, rich in lyes. The tendency of children to crave sweet and starchy foods is well known, and the author thinks that it also is due to the same law. Children play and move about a good deal, and so need carbohydrates for the supply of energy. Their heat radiation is also greater than in adults, as the body surfaces is comparatively greater. This also calls for carbohydrates. It is not right, therefore, to force children to eat more meat, as many physicians and parents do. The author has experimented on fowls to show the working of this law of taste. He fed both hens and cocks on grain, water, and lime, each in separate receptacles, and daily weighed the lime left over, so as to determine the amount taken under different conditions. The cocks did not eat lime, while the hens did; the hens also kept up a certain average ingestion of lime, *i. e.*, when they had not eaten enough one day they made up on the other days. This shows that the hens needed lime to produce egg-shells, and that they lost the desire for it from time to time, when they had had enough, but recovered this desire as soon as the stock of lime became low."

RADIUM IN MEDICINE.—The *Medical Record*, reporting a paper read at a meeting of the New York State Medical Association, says: "Dr. Samuel G. Tracy, of New York, presented this paper. He pointed out that pure radium salts evolved enough heat to melt more than their weight in ice every hour, and yet at the end of months the radium was as potent as before, and one could observe no change in its weight or by chemical, microscopical, or spectroscopic examination. This substance had thrown the first doubt upon the law of the conservation of energy. If a small glass tube containing radium were kept in the vest-pocket for several hours it would cause a severe burn, but the full

physiological effect would not be noted for a week or ten days. Seeds exposed to radium for several hours lost their germinating power. As yet comparatively few physicians had reported upon the use of this wonderful substance in deeply seated cancer, yet there was reason to believe that it might prove very useful in such cases as well as in lupus, rodent ulcer, and superficial cancer. Radium was known to possess bactericidal power, and it had been inferred from this and its other properties that it should prove beneficial in pulmonary tuberculosis. Specimens of radium were exhibited, and the attention of those present called to the fact that pure radium did not fluoresce, but that fluorescence was observed when radium was more or less adulterated."

HEADACHE AS A SYMPTOM.—The *New York and Philadelphia Medical Journal* has an editorial on Dr. Ellis's paper on this subject. Dr. Ellis believes that sixty per cent. of all headaches are due in a greater or less degree to some fault in the eyes. Those arising from this cause are oftener dull and heavy than very sharp. When they are not due to a diseased condition they are most commonly found in persons who make considerable use of the muscles of accommodation and convergence. When a person complains of headache after riding in a car, going to church or the theatre, or after shopping, it is reasonable to suspect the eyes. When headache occurs as the result of an ocular defect, it almost always comes on within a few hours after the eyes have been taxed, but sometimes it holds off until the next day, especially when the eyes have been used to a considerable extent at night. In patients subject to attacks of sick headache it is always wise to look for eye defects. They occur in about sixty per cent. of such cases, and their correction leads to amelioration and frequently to cure. Headache is common as a result of nervous exhaustion from almost any cause, and particularly from prolonged mental effort or worry. When it is caused by anæmia it is generally frontal. In congestive headache the pain is of a throbbing character. Toxic headaches are frontal and deep-seated. Syphilitic headache is neuralgic and limited to the temples. Stomachic and hepatic headaches are usually occipital or vertical, but they may be frontal or general. Ocular headache must not be confounded with neurasthenic headache, which is probably toxic and continues after every source of peripheral irritation has been removed.

TREATMENT OF APPARENT DEATH OF THE NEWLY-BORN.—The *Journal of the American Medical Association*, quoting from a foreign contemporary, says: "Zangemeister remarks that the attempts to apply the inhalation of oxygen as a therapeutic measure have not been very satisfactory as a general thing, but there is one condition in which it is proving extremely valuable. This is in severe asphyxia neonatorum. The almost invariable success and the rapidity of its action, with no inconveniences, render it a most valuable aid in this emergency. He uses a thin-walled rubber bulb filled from a small portable tank of compressed oxygen. The oxygen is forced through a tracheal catheter into the infant's lungs by gentle, regular pressure on the bulb. When the lungs have become distended he applies gentle external pressure to the thorax. The air escapes along the outside of the catheter, which must be of small diameter to allow this. The lungs are then inflated again by gentle pressure on the bulb and emptied as before, and these procedures are repeated continuously as long as required. The prompt reddening of the skin shows the favorable action of the oxygen. It can be applied while the infant is in a warm bath. The narcosis

from carbon dioxide is dispelled in this way more rapidly than by any other means, and the stimuli applied becomes more promptly effectual."

ERGOT IN ALCOHOLISM AND MORPHINISM.—In a paper given at the meeting of the New York State Medical Association Dr. Alfred J. Livingston said that the sleeplessness, pain, and restlessness following the attempt to break off the drug habit would be more surely relieved by ergot than by the narcotic drugs. The first step was wholly to discontinue the use of the narcotic. He then gave ergot hypodermically and administered a laxative, fluid extract of rhamnus fragula, one or two drams at bedtime and sometimes more frequently to keep the bowels open. In general he gave two or three doses of ergot, nearly a dram each of his solution, each day. It could be given by mouth, but he found the hypodermic method better. He believed the nervous disturbance depended upon the disturbance of the vascular system, and ergot restored the equilibrium of the circulation.

Dr. Alexander Lambert had had a wide experience at Bellevue Hospital in the treatment of confirmed alcoholism. For years during each service of six weeks he had had twenty-five or thirty deaths. Since using ergot after Dr. Livingston's method he had had only six or seven deaths in the same time.

Dr. Frederick H. Wiggin had found ergot useful in these cases, but gave fifty or sixty minims at a dose.

SUFFOCATION BY FECAL VOMIT.—Dr. Andrews in an article in the *Annals of Surgery* says this accident happens during operations for intestinal obstruction and septic peritonitis. His conclusions are as follows:

"1. Flooding of the air-passages by fecal vomit is a real danger, and probably has caused many unexplained deaths. 2. Resuscitation is impossible or very difficult. 3. The fluid may flow by gravity through the relaxed stomach sphincters directly out of the intestine, where it has accumulated in enormous quantities. 4. The accident occurs with great suddenness and with a stomach supposedly empty. The suffocation may be so complete that no outcry is made and may not be noticed by the attendant. 5. It may occur as late as an hour after anæsthesia, or at any time until consciousness is restored. 6. We have no evidence that it can occur during consciousness even in extremis. 7. After septic laparotomy, patients, when returned to bed, should be watched, without even momentary intervals, to full consciousness. 8. A suggestion made to me by Dr. McArthur that as many as possible of such cases be operated under cocaine anæsthesia seems to me sound in the light of the above report."

CYSTITIS AFTER OPERATIONS.—A writer in a German medical journal recommends the use of glycerine as a preventive of the cystitis following an operation, which he considers a bacterial inflammation of the bladder. He avoids the use of the catheter as long as possible. When necessary a soft catheter is inserted, and as soon as the urine begins to flow he applies a syringe and slowly injects twenty cubic centimetres of a two per cent. glycerine solution of boric acid. Usually in from five to ten minutes the patient passes urine spontaneously and there is no ill effect afterwards. It is seldom necessary to repeat the injection. When continued catheterization is unavoidable the bladder is washed out each time with five hundred cubic centimetres of a three per cent. solution of boric acid. This had warded off cystitis in nearly every one of his cases.